


**2005 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 18, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N28063</b> 1. Entity Name <b>ST. PETERSBURG COMMUNITY CHURCH INCORPORATED</b>	
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Principal Place of Business <b>4501 30TH AVE., NORTH ST. PETERSBURG, FL 33713-2109 US</b>	Mailing Address <b>4501 30TH AVE., NORTH ST. PETERSBURG, FL 33713-2109 US</b>
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01052005 No Chg-NP CR2E037 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>59-2954663</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

**HILDRETH, RANDALL  
4501 30TH NORTH  
ST. PETERSBURG, FL 33713-2109**

**DO NOT WRITE  
IN THIS SPACE**

**8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.**

**SIGNATURE**

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2005**

**9. Election Campaign Financing  
Trust Fund Contribution.** ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY - ST - ZIP	DC SPAN, JOHN 4501 30TH NORTH ST. PETERSBURG, FL 337132109
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HILDRETH, RANDALL 4501 30TH NORTH ST. PETERSBURG, FL 337132109
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS NAVARRA, WADE 4501 30TH NORTH ST PETERSBURG, FL 337132109
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

1100000183823  
01/20/05-80006-001 61.25

**DO NOT WRITE  
IN THIS SPACE**

**12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.**

**SIGNATURE:**

*Randall D. Hildreth* **Randall D. Hildreth** 1/5/05 737  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone 525-0012